

PLAINTIFFS' EXHIBIT 4 (PX004)

PART B

2019 Poultry Industry Compensation and Benefits Survey

A. Pension – Defined Benefit

	Salaried Personnel	Hourly Personnel
Offered	Provided by one (1) company (7.7%). Plus, three plans are frozen/closed to new entrants.	Provided by one (1) company (7.7%). Plus, two plans are frozen/closed to new entrants.

B. Pension – Defined Contribution

	Salaried Personnel	Hourly Personnel
Offered	401(K) provided by 100% of companies.	401(K) provided by 100% companies.
New Hire Enrollment	Five (5) companies (38.5%) automatically enroll new hires.	Four (4) companies (30.8%) automatically enroll new hires.
Vesting	Ranges from immediate to 6 years. Median = immediate Average = 1.8 years	Ranges from immediate to 6 years. Median = immediate Average = 1.8 years
Safe Harbor Matching Contributions	Nine (9) companies (69.2%) have a Safe Harbor matching contribution.	Nine (9) companies (69.2%) have a Safe Harbor matching contribution.
Contributions Matched	Maximum employee contribution matched by employer ranges from 3% to 6%. Median = 5.0% Average = 4.8%	Maximum employee contribution matched by employer ranges from 3% to 6%. Median = 5.0% Average = 4.8%
Effective Employer Matching Contribution	Ranges from 25% to 100% as a percent of employee contribution. Median = 75.0% Average = 65.3% Most prevalent plan (5 companies) is an effective employer match of 4% of employee pay (i.e., 100% of first 3%; 50% of next 2%). Median = 4.0% Average = 3.2%	Ranges from 25% to 100% as percent of employee contribution. Median = 80.0% Average = 67.7% Most prevalent plan (5 companies) are an effective employer match of 4% of employee pay (i.e., 100% of first 3%; 50% of next 2%). Median = 4.0% Average = 3.2%
Profit Sharing 3 Year Average Contribution	Reported by two (2) companies (15.4%): 2.0% and 4.0%. <ul style="list-style-type: none"> Profit Sharing: 1 company ESOP: 1 company Thrift Savings Plan: 1 company 	Reported by one (1) company (7.7%): 2.0%. <ul style="list-style-type: none"> Thrift Savings Plan: 1 company

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C. Flexible Benefits Plans

	Salaried Personnel	Hourly Personnel
Policy	Provided by nine (9) companies (69.2%).	Provided by eight (8) companies (61.5%).
Available Options		
▪ Medical	Provided by eight (8) companies (61.5%).	Provided by seven (7) companies (53.8%).
▪ Dental	Provided by seven (7) companies (53.8%).	Provided by six (6) companies (46.2%).
▪ Paid Leave	Provided by two (2) companies (15.4%).	Provided by two (2) companies (15.4%).
▪ Sick Leave/Salary Continuance	Provided by two (2) companies (15.4%).	Provided by two (2) companies (15.4%).
▪ Basic Life	Provided by four (4) companies (30.8%).	Provided by three (3) companies (23.1%).
▪ Supplemental Life	Provided by eight (8) companies (61.5%).	Provided by six (6) companies (46.2%).
▪ AD & D	Provided by six (6) companies (46.2%).	Provided by five (5) companies (38.5%).
▪ Long-term Disability	Provided by six (6) companies (46.2%).	Provided by four (4) companies (30.8%).
▪ Short-term Disability	Provided by five (5) companies (38.5%).	Provided by five (5) companies (38.5%).
▪ Supplemental Medical	Provided by two (2) companies (15.4%).	Not provide by any company.
▪ Vision	Provided by six (6) companies (46.2%).	Provided by six (6) companies (46.2%).
▪ EAP	Provided by three (3) companies (23.1%).	Provided by three (3) companies (23.1%).
▪ Adoption Assistance	Provided by two (2) companies (15.4%).	Provided by one (1) company (7.7%).
▪ Flexible Spending Account	Provided by six (6) companies (46.2%).	Provided by four (4) companies (30.8%).

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C. Flexible Benefits Plans - continued

	Salaried Personnel	Hourly Personnel
▪ Healthcare Reimbursement	Provided by one (1) company (7.7%).	Provided by one (1) company (7.7%).
▪ Dependent Care Reimbursement	Provided by one (1) company (7.7%).	Provided by one (1) company (7.7%).
▪ Other: Accident, Critical Care/Illness	Provided by (1) company (7.7%).	Provided by one (1) company (7.7%).

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D. Life Insurance

	Salaried Personnel	Hourly Personnel
Basic Life - Offered	Provided by all companies. Entirely company paid by 12 companies (92.3%). Partially paid by one (1) company (7.7%).	Provided by all companies. Entirely company paid by 12 companies (92.3%). Partially paid by one (1) company (7.7%).
Basic Life - Coverage	<p>1 company: 1-5x salary (\$800,000 max)</p> <p>1 company: 3x salary (\$1,000,000 max)</p> <p>2 companies: 2x salary (maximums: 1 at \$2,500,000; 1 at \$600,000)</p> <p>1 company: 1.5x salary (\$350,000 max)</p> <p>3 companies: 1x salary (maximums: 2 at \$1,000,000; 1 at \$500,000)</p> <p>1 company: \$40,000</p> <p>2 companies: \$25,000</p> <p>1 company: \$20,000</p> <p>1 company: \$10,000</p>	<p>1 company: 3x pay (\$1,000,000 max)</p> <p>4 companies: 1x salary (maximums: 1 at \$2,500,000; 1 at \$1,000,000; 1 at \$100,000; 1 at \$50,000)</p> <p>2 companies: \$25,000</p> <p>2 companies: \$20,000</p> <p>1 company: \$15,000</p> <p>3 companies: \$10,000</p>

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D. Life Insurance - continued

	Salaried Personnel	Hourly Personnel
Optional Life - Offered	<p>Provided by all companies.</p> <p>Entirely employee paid by twelve (12) companies (92.3%).</p> <p>Partially paid by one (1) company (7.7%).</p>	<p>Provided by twelve (12) companies (92.3%).</p> <p>Entirely employee paid by eleven (11) companies (84.6%).</p> <p>One (1) company pays 50% of premium (7.7%).</p>
Optional Life - Coverage	<p>4 companies: up to 5x salary (maximums: 1 at \$2,500,000; 1 at \$1,500,000; 1 at \$800,000; 1 at \$500,000)</p> <p>1 company: up to 4x salary (\$1,000,000 max)</p> <p>2 companies: up to 2x salary (\$600,000 max)</p> <p>2 companies: \$500,000</p> <p>1 company: \$10,000 increments up to \$500,000</p> <p>1 company: \$10,000 increments up to \$150,000</p> <p>1 company: \$10,000 minimum (\$100,000 max)</p> <p>1 company: \$25,000 to \$200,000</p>	<p>3 companies: up to 5x salary (maximums: 1 at \$2,500,000; 1 at \$1,500,000; 1 at \$500,000)</p> <p>2 companies: \$500,000</p> <p>1 company: \$10,000 increments to \$500,000 max</p> <p>1 company: \$25,000 to \$200,000</p> <p>1 company: \$10,000 to \$150,000</p> <p>2 companies: \$10,000 to \$100,000</p> <p>1 company: \$10,000/\$25,000/\$50,000</p> <p>1 company: \$10,000</p>

	Salaried Personnel	Hourly Personnel
Offered	<p>Provided by eleven (11) companies (84.6%).</p> <p>Entirely employer paid by nine (9) companies.</p> <p>Partially employer paid by one (1) company.</p> <p>Entirely employee paid by one (1) company.</p>	<p>Provided by eleven (11) companies (84.6%).</p> <p>Entirely employer paid by eight (8) companies.</p> <p>Partially employer paid by one (1) company.</p> <p>Entirely employee paid by two (2) companies.</p>
Coverage	<p>In ten (10) companies Basic ADD equals Basic Life coverage.</p> <p>For the one (1) company where the coverage is different:</p> <p>One (1) of the companies has a maximum of \$250,000 (instead of \$10,000).</p>	<p>In eleven (11) companies Basic ADD equals Basic Life coverage.</p>

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F. Long-Term Disability

	Salaried Personnel			Hourly Personnel		
Offered	Provided by eleven (11) companies (84.6%). Entirely employer paid by four (4) companies. Entirely employee paid at five (5) companies. Partially employee paid at one (1) company.			Provided by eight (8) companies (61.5%). Entirely employer paid at one (1) company. Entirely employee paid at seven (7) companies.		
Coverage	# Co's	Waiting Period	Benefits as a % of Salary	# Co's	Waiting Period	Benefits as a % of Salary
	1	6 months	60%-70% (\$10,000 max)	1	3 months	66 ^{2/3} % (\$900 max)
	2	3 months	60% (maximums: 1 at \$15,000; 1 at \$10,000)	2	3 months	60% (maximums: 1 at \$10,000 1 at \$2,500)
	1	3 months	50% (\$5,000 max)	1	3 months	50% (\$5,000 max)
	6	6 months	60% (maximums: 1 at \$12,500; 1 at \$10,000; 1 at \$7,500; 1 at \$6,000; 2 at \$5,000)	3	6 months	60% (maximums: 1 at \$7,500; 1 at \$6,000; 1 at \$4,000)
	1	6 months	50% (\$10,000 max)	1	6 months	50% (\$6,000 max)
Supplemental Coverage	Offered by four (4) companies (30.8%).			Offered by two (2) companies (15.4%).		

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G. Short-Term Disability

		Salaried Personnel	Hourly Personnel
Policy		<p>Provided by eleven (11) companies (84.6%).</p> <p>Entirely company paid by eight (8) companies.</p> <p>Partially paid by one (1) company.</p> <p>Employee paid by two (2) companies.</p>	<p>Provided by twelve (12) companies (92.3%).</p> <p>Entirely company paid by six (6) companies.</p> <p>Partially employee paid at two (2) companies.</p> <p>Entirely employee paid at four (4) companies.</p>
Salary (Pay) Continuation		Present at eleven (11) companies (84.6%).	Present at six (6) companies (46.2%).
Insured Product		Product is insured by three (3) companies (23.1%) with one (1) company paying 100%, one (1) company at 0%, and one (1) company at partial.	<p>Product is insured by six (6) companies (46.2%).</p> <p>2 companies: 100% paid</p> <p>2 companies: partially paid</p> <p>2 companies: 0% paid</p>
Policy	<u>Code</u>		
	A	Covered up to 13 weeks at 60% of salary. Seven (7) day wait period.	Covered up to 13 weeks at 60% of salary. Seven (7) day wait period.
	B	Covered up to 26 weeks at 100% of salary with 5 years of seniority. No wait period.	Covered up to 26 weeks at 50% of salary. Seven (7) day wait period.
	C	Full salary for certain number of weeks based on years of service and then covered up to 26 weeks at 67% of salary. No wait period.	Covered up to 26 weeks at 50%-60% of salary. Five (5) days wait period.
	D	First 90 days no benefit; 90 days to 1 year up to 7 weeks 100% of pay; 1 year to 3 years up to 12 weeks 100% of pay, plus up to 14 weeks at 50% of pay; 3 years or more 26 weeks at 100% of pay. No wait period.	Covered up to 13 weeks at \$175 per week. Seven (7) day wait period for an illness, if an accident no wait.
	E	Covers 6 weeks at 100% of salary and next 20 weeks at 60% of salary. Maximum is 26 weeks. Seven (7) day wait period for illness; no wait for accident.	Covered up to 26 weeks at 60% of salary. Seven (7) day wait period for illness; no wait for accident.
	F	Covered up to 26 weeks at 50% of salary. Five (5) day wait period.	Cover up to 26 weeks at \$225 per week. Seven (7) day wait period.

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G. Short-Term Disability - continued

	Code	Salaried Personnel	Hourly Personnel
Policy	G	No STD. Sick leave policy based on length of service and position.	Covered up to 3 months at 60% of pay. Waiting period is 1 to 8 days.
	H	Covered up to 26 weeks at 60-100% of salary. Wait period?	Cover up to 18 weeks at 50% of salary with a \$325 weekly max. Twelve (12) month waiting period.
	I	Covered up to 26 weeks at 60%/100% of salary. No wait period.	Cover up to 12 weeks at 50%/60% of salary. First day of hospitalization or 7 days wait period.
	J	Covered up to 26 weeks at 60% of pay. Seven (7) day wait period.	Cover up to 26 weeks at 60% of pay. Seven (7) day wait period.
	K	--	--
	L	Covered up to 3 months (520 hours) at 100% of pay. Five (5) day wait period.	Covered up to 3 months (520 hours) at 60% of salary. Five (5) day wait period.
	M	Covered up to 25 weeks at 60% of pay. Seven (7) day wait period.	Covered up to 25 weeks at 60% of pay. Seven (7) day wait period.

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G. Short-Term Disability - continued

Schedule Benefit Based on Service	Code	Salaried Personnel			Hourly Personnel		
		<u>Yrs Service</u>	<u>Weeks Full Salary</u>	<u>Weeks at Partial % of Salary</u>	<u>Yrs Service</u>	<u>Weeks at Full Salary</u>	<u>Weeks at Partial % of Salary</u>
	C	>5	4	22 @ 67%	>5	0	4 @ 50%
		5-9	13	13 @ 67%	5-9	0	13 @ 50%
		10+	26	26 @ 67%	10+	0	26 @ 50%
	D	90 days	7		--	--	--
		1-3	12	14 @ 50%			
		3+	26				
	F	<1	1	25 @ 66 2/3%			
		1-4	3	23 @ 66 2/3%	--	--	--
		5-9	9	17 @ 66 2/3%			
		10-14	15	11 @ 66 2/3%			
	G	3 mos	4	--			
		3	6	--	--	--	--
		5	8	4 @ 50%			
		10	12	8 @ 50%			
	H	<1	2	6 @ 60%	--	--	--
		1+	13	13 @ 60%			
	I	0-5	4	22 @ 60%	1-3	0	12 @ 50%
		5-10	13	13 @ 60%	3+	0	12 @ 60%
		10+	26				

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H. Sick Leave

	Salaried Personnel	Hourly Personnel
Policy	Sick days are provided by seven (7) companies (53.8%).	Sick days are provided by five (5) companies (38.5%).

I. Holidays (including personal days)

	Salaried Personnel	Hourly Personnel
Policy	Range: 6-12 days Median: 8 days Average: 8.2 days	Range: 6-11 days Median: 8 days Average: 7.9 days

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J. Vacation Policy

Length of Service	Salaried Personnel																			
	Number of Vacation Days																			
	0	5	10	12	13	14	15	17	18	20	22	25	27	29	30					
<1 year	9	3	1																	
1 year		2	8	1		1	1													
2 years		2	7	2		1	1													
3 years			9	2			1			1										
4 years			8	1	1		1			2										
5 years			4				6	1		2										
9 years			4				6	1		1	1									
10 years			1				8	1	1		1	1								
11 years			1				7	1	1	1		2								
12 years							9	1	1			2								
14 years							8	1	1	1		2								
15 years							5			5	1	2								
17 years							4			6	1	2								
18 years							4			6	1	1		1						
20 years							2			8	1				1					
24 years							1			8	1	1			1					
25 years							1			7		2	1	1	1					

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J. Vacation Policy - continued

Length of Service	Hourly Personnel Number of Vacation Days										
	0	5	7	10	12	15	17	20	22	25	27
<1 year	12	1									
1 year		8	1	3	1						
2 years		5	1	6	1						
3 years				11	2						
5 years				10	1	1	1				
8 years				9		2	2				
10 years				1		10	2				
12 years						11	2				
14 years						11	1		1		
15 years						10		1		2	
19 years						9		2	2		
20 years						2		9	2		
25 years						2		9	1	1	1

	Salaried Personnel	Hourly Personnel
Vacation Forfeited if Not Used	Yes: 6 companies (46.2%) No: 7 companies (53.8%)	Yes: 8 companies (61.5%) No: 5 companies (38.5%)
Vacation Carryover	Permitted by six (6) companies (46.2%). Two (2) companies permit 5 days to be carried over. One (1) company permits 10 days to be carried over. One (1) company permits unlimited carryover. Two (2) companies permit up to 2x annual accrual.	Permitted by three (3) companies (23.1%). Two (2) companies permit 2x annual accrual. One (1) company permits a carryover of what earned that year.
Employees Compensated for Unused Vacation Time	Yes: 5 companies (38.5%) • All unused time: 4 companies • Partial unused time: 1 company No: 8 companies (61.5%)	Yes: 7 companies (53.8%) • All unused time: 5 companies • Percent of unused time: 1 company No: 6 companies (46.2%)

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K. Vehicle Policy

		Salaried Personnel	
Policy		Reported by nine (9) companies (69.2%).	
	<u>Code</u>	<u>Eligible Position</u>	<u>Vehicle Type</u>
	A	Service Reps, Feed Mill Manager, Live Haul Manager, Director of Live Operations and Hatchery Manager	Pickup Truck
	B	Farm Managers and Service Reps Executive Staff and Sales Team	Pickup Truck Cars / Vans
	C	Flock/Sr. Flock Advisors, Growout Manager, Field Vaccinators and Blood Testers (hourly) (Flock/Sr. Flock Advisors and Growout Managers may use company vehicle for personal use also.	Truck or Car (perquisite/required)
	D	Live Operations, VP Operations, Live Operations Manager, and Veterinarian Executives, VP's, Sales, and Safety & Technology	Vehicle provided Allowance
	F	VP & above Sales Managers Breeder / Broiler Reps	Allowance provided Chevy Impala Vehicle provided
	G	Head of Live Areas, Feed Mills, Truck Shop Managers Broiler Techs, Breeder Techs, Area Safety Coordinator, Environmental Manager, Process Improvement Manager, and Quality Manager Corporate Recruiter, and Corporate Trainer	Pickup Truck / Ford Escape Pickup Truck Ford Escape
	I	All Service Techs and Housing Manager General Manager, Director HR, Director Safety, Director QA, VP and CEO	Pickup Truck Car

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K. Vehicle Policy - continued

		Salaried Personnel	
Policy		Reported by nine (9) companies (69.2%).	
	<u>Code</u>	<u>Eligible Position</u>	<u>Vehicle Type</u>
	J	Vice President Complex Managers	Vehicle provided Allowance provided
	K	Field Technician and Sales	Economy hybrid sedan

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L. Health Plan Cost Sharing Strategies**1. Company Plan to Cover Total Health Plan Costs**

Not able to calculate by one (1) company.

	Expressed as a Percentage of Total Costs
Highest	80.0%
75th Percentile	77.0%
Median	75.0%
Average	74.5%
25th Percentile	70.0%
Lowest	70.0%

2. Employee Opt Out

All companies permit their salaried and hourly employees to opt out of the health insurance programs. No one permits employees who decide to opt out of the program to receive compensation.

3. Percentage of employees enrolled in health plans.

Highest	93.0%
75th Percentile	84.5%
Median	78.0%
Average	74.0%
25th Percentile	66.0%
Lowest	40.0%

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L. Health Plan Cost Sharing Strategies - continued**4. Total Health Care Costs (per enrolled employee).**

Not able to calculate by two (2) companies.

	All Enrolled Employees
75th Percentile	\$9,307
Median	\$7,976
Average	\$7,944
25th Percentile	\$6,716

A 11.3% increase in median (10.3% increase in average) from prior year.

5. Spousal Carve Out / Surcharge

	Salaried Personnel	Hourly Personnel
Policy	Provided by all companies.	Provided by all companies.
Available coverage if spouse has coverage available from another employer	<p>Ineligible entirely under the plan: 2 companies</p> <p>Eligible, but employee must pay additional cost to cover spouse: 7 companies</p> <p>Additional cost per month:</p> <p>75th: \$155.00 Median: \$115.00 Average: \$125.56 25th: \$100.00</p> <p>Eligible, but only if the spouse is also enrolled in the plan available through their employer: 0 companies</p> <p>Eligible, no conditions: 4 companies</p>	<p>Ineligible entirely under the plan: 2 companies</p> <p>Eligible, but employee must pay additional cost to cover spouse: 8 companies</p> <p>Additional cost per month:</p> <p>75th: \$150.00 Median: \$100.00 Average: \$118.33 25th: \$100.00</p> <p>Eligible, but only if the spouse is also enrolled in the plan available through their employer: 0 companies</p> <p>Eligible, no conditions: 3 companies</p>

	Salaried Personnel	Hourly Personnel
Policy	<p>Provided by five (5) companies (38.5%).</p> <p>One (1) company recognizes legal marriage regardless of gender.</p>	<p>Provided by five (5) companies (38.5%).</p> <p>One (1) company recognizes legal marriage regardless of gender.</p>
Available Coverage	<p>Same Sex Partners Only: 0 companies</p> <p>Opposite Sex Partners Only: 0 companies</p> <p>Both Same Sex and Opposite Sex Partner (must be legally married at two companies): 5 companies</p>	<p>Same Sex Partners Only: 0 companies</p> <p>Opposite Sex Partners Only: 0 companies</p> <p>Both Same Sex and Opposite Sex Partner (must be legally married at two companies): 5 companies</p>

	Salaried Personnel	Hourly Personnel
Policy	<p>Provided by four (4) companies (30.8%).</p> <p>Nine (9) companies do not have paternity leave.</p> <p>One (1) company reported per FMLA.</p>	<p>Provided by four (4) companies (30.8%).</p> <p>Nine (9) companies do not have paternity leave.</p> <p>One (1) company reported per FMLA.</p>

	Salaried Personnel	Hourly Personnel
Policy	<p>Provided under plan by seven (7) companies (53.8%).</p> <p>The plans of six (6) companies (46.2%) do not cover Autism Spectrum Disorder.</p>	<p>Provided under plan by seven (7) companies (53.8%).</p> <p>The plans of six (6) companies (46.2%) do not cover Autism Spectrum Disorder.</p>

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P. Group Health – Reimbursement Accounts

	Salaried Personnel	Hourly Personnel
Policy	Provided by eight (8) companies (61.5%).	Provided by seven (7) companies (53.8%).
Accounts Offered	Health Savings Account: 4 companies Flexible Spending Account: 7 companies Healthcare Reimbursement Account: 2 companies Dependent Care Reimbursement Account: 4 companies	Health Savings Account: 2 companies Flexible Spending Account: 7 companies Healthcare Reimbursement Account: 2 companies Dependent Care Reimbursement Account: 4 companies

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Q. Group Health – Wellness / Prevention / Special Programs

	Salaried Personnel	Hourly Personnel
Policy	Provided by all companies.	Provided by all companies.
Programs Offered		
▪ Stress Management	Provided by five (5) companies (38.5%).	Provided by four (4) companies (30.8%).
▪ Smoking Cessation	Provided by eleven (11) companies (84.6%).	Provided by twelve (12) companies (92.3%).
▪ Weight Control	Provided by eight (8) companies (61.5%).	Provided by seven (7) companies (53.8%).
▪ Employee Assistance	Provided by twelve (12) companies (92.3%).	Provided by eleven (11) companies (84.6%).
▪ Infertility	Provided by five (5) companies (38.5%).	Provided by five (5) companies (38.5%).
▪ Prenatal Care	Provided by eleven (11) companies (84.6%).	Provided by ten (10) companies (76.9%).
▪ Well Baby Care	Provided by eleven (11) companies (84.6%).	Provided by twelve (12) companies (92.3%).
▪ Home Health Care	Provided by nine (9) companies (69.2%).	Provided by nine (9) companies (69.2%).
▪ Elder Care	Provided by one (1) company (7.7%).	Provided by one (1) company (7.7%).
▪ On-site Health Clinics	Provided by seven (7) companies (53.8%).	Provided by seven (7) companies (53.8%).
▪ Physical Fitness Facility Access	Provided by four (4) companies (30.8%).	Provided by four (4) companies (30.8%).
▪ Telemedicine	Provided by eleven (11) companies (84.6%).	Provided by eleven (11) companies (84.6%).

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Q. Group Health – Wellness / Prevention / Special Programs
- continued

	Salaried Personnel	Hourly Personnel
▪ Other: Off site clinical	--	Provided by one (1) company (7.7%).
▪ Other: Routine physicals; Colonoscopies; Mammograms; Flu shots; Cardiovascular screenings; PSA	Provided by one (1) company (7.7%).	--
▪ Other: Future Mom's Program	--	Provided by one (1) company (7.7%). (Future Mom's Program with tiered cash incentive up to \$200 to complete the program.)

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Q. Group Health – Wellness / Prevention / Special Programs**- continued**

		Salaried Personnel	Hourly Personnel
Policy		Provided by five (5) companies (38.5%).	Provided by four (4) companies (30.8%).
Wellness Programs / Incentives	Code		
	A	Not offered	Not offered
	B	Results based incentives tied to premiums.	Results based incentives tied to premiums.
	C	Not offered	Not offered
	D	Not offered	Not offered
	E	Not offered	Not offered
	F	Not offered	Not offered
	G	Screenings involve on-site lab screenings with contracted hospital staff. Employees who participate in the wellness screenings receive a Wal-Mart gift card as well as access to gym memberships, nutritional counseling classes, follow-up screenings to monitor lab values, etc. Available to all employees and spouses covered under the health plan.	Screenings involve on-site lab screenings with contracted hospital staff. Employees who participate in the wellness screenings receive a Wal-Mart gift card as well as access to gym memberships, nutritional counseling classes, follow-up screenings to monitor lab values, etc. Available to all employees and spouses covered under the health plan.
	H	Annual physical and biometric screening will fulfill 100% of wellness incentives.	When annual physical and biometrics are completed, full wellness incentives can be earned.
	I	Not offered	Not offered
	J	Not offered	Not offered
	K	Not offered	Not offered

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Q. Group Health – Wellness / Prevention / Special Programs**- continued**

		Salaried Personnel	Hourly Personnel
Policy		Provided by five (5) companies (38.5%).	Provided by four (4) companies (30.8%).
Wellness Programs / Incentives	<u>Code</u> L	Lower premiums for team members that participate and pass biometric measures.	Not offered
	M	Employees who participate in "Rally (brand)" survey, and attend biometric health screening receive up to 20% discount.	Employees who participate in "Rally (brand)" survey, and attend biometric health screening receive up to 20% discount.

2019 Poultry Industry Compensation and Benefits Survey

R. Medical Insurance**1. Salaried Personnel****a. Monthly Contributions for Medical Coverage Plan**

Code	Type	Provided	Employee Cost Per Month		
			Employee Only	Employee + 1	Family
A	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$130.00	\$238.00	\$433.00
B	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$122.00	\$216.00	\$312.00
C	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$125.97	\$356.12	\$468.56
D	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$112.67	\$253.50	\$377.00
E	Indemnity Plan	No	--	--	--
	High Deductible Plan	Yes	\$102.92	\$186.33	\$351.00
	PPO Plan	No	--	--	--
F	Indemnity Plan	No	--	--	--
	High Deductible Plan Under \$55,000 / \$55,000 or more	Yes	\$110.00 / \$136.00	w/spouse: \$287.99 / \$355.01 child(ren): \$242.00 / \$298.00	\$408.01 / \$502.00
	PPO Plan	No	--	--	--

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

a. Monthly Contributions for Medical Coverage Plan – continued

Code	Type	Provided	Employee Cost Per Month		
			Employee Only	Employee + 1	Family
G	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$169.00	\$273.00	\$325.00
H	Indemnity Plan (HRA)	Yes	\$104.00	w/spouse: \$289.00 children: \$235.00	\$380.00
	High Deductible Plan (HSA)	Yes	\$83	w/spouse: \$227.00 children: \$183.00	\$295.00
	PPO Plan (Primary)	Yes	\$37	w/spouse: \$145.00 children: \$107.00	\$201.00
I	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$98.58	\$191.75	\$341.17
J	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$82.42/\$110.20/ \$172.90	\$161.85/\$214.15/ \$345.97	\$271.66/\$350.87/ \$518.96
K	Indemnity Plan	No	--	--	--
	High Deductible Plan	Yes	--	--	--
	PPO Plan	Yes	\$132.00	\$455.65	\$702.45

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

a. Monthly Contributions for Medical Coverage Plan – continued

Code	Type	Provided	Employee Cost Per Month		
			Employee Only	Employee + 1	Family
L	Indemnity Plan	Yes	--	--	--
	High Deductible Plan	Yes	\$68.14	\$118.80	\$254.22
	PPO Plan	Yes	\$68.14	\$118.80	\$254.22
M	Indemnity Plan	No	--	--	--
	High Deductible Plan	Yes	\$88.62	\$216.97	\$410.11
	PPO Plan	Yes	\$99.95	\$268.84	\$464.28

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

b. Medical Plan Provisions

Medical Deductibles

Code	Plan with highest enrollment	In-network		Out-of-network	
		Individual	Family	Individual	Family
A	Green PPO	\$500	\$1,500	\$1,500	\$4,500
B	Standard Plan	\$1,150	\$2,300	\$2,300	\$4,600
C	Essential 20	\$1,200	\$2,400	\$2,400	\$4,800
D	Employee Only	\$1,000	\$3,000	\$3,000	\$9,000
E	CDHP Plan	\$1,600	\$3,200	\$4,000	\$8,000
F	WellChoice	\$1,500	\$2,700	\$3,000	\$5,000
G	Only Plan Option	\$750	\$1,500	\$850	\$1,700
H	HRA	\$1,200	\$2,400	\$2,400	\$4,800
I	High Plan	\$175	\$350	\$350	\$750
J	70/50 PPO	\$550	\$1,650	\$1,100	\$3,300
K	Unknown	\$1,250	\$2,500	--	--
L	PPO Plan	\$1,100	\$2,200	\$1,100	\$2,200
M	PPO Preventive	\$500	\$1,000	\$1,500	\$3,000

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

b. Medical Plan Provisions

Maximums

Code	Maximum Deductible In-network		Maximum Deductible Out-of-network	
	Individual	Family	Individual	Family
A	\$2,500	\$5,000	No limit	No limit
B	\$4,500	\$9,000	\$9,000	\$18,000
C	\$6,000	\$12,000	\$12,000	\$24,000
D	\$3,000	\$6,000	\$9,000	\$18,000
E	\$5,000	\$10,000	\$12,500	\$25,000
F	\$2,500	\$5,000	n/a	n/a
G	\$5,000	\$10,000	\$6,000	\$12,000
H	\$3,500	\$6,800 ind / \$7,000 fam	\$7,000	\$14,000
I	\$2,500	\$5,000	\$5,000	\$10,000
J	\$3,050	\$9,150	\$6,150	\$18,400
K	\$5,000	\$10,000	--	--
L	\$1,100	\$2,200	\$1,000	\$2,100
M	\$6,600	\$13,200	\$16,500	\$33,000

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

b. Medical Plan Provisions

Doctors Visits

Code	Co-pay Required Per Doctors Visit		Is Preventive Care Provided?	
	In-network	Out-of-network	In-network	Out-of-network
A	\$15	0	Yes	No
B	\$40	\$60	Yes	Yes
C	\$30/\$50	40% after deductible	Yes	Yes
D	\$30	60% after deductible	Yes	No
E	n/a	n/a	Yes	Yes
F	n/a	n/a	Yes	No
G	--	--	Yes	No
H	20% coinsurance employee	40% coinsurance employee	Yes	Yes
I	\$20	40% after deductible	Yes	Yes
J	\$25 / \$50	50%	Yes	Yes
K	\$30	--	Yes	Yes
L	\$35 (PCP)	co-pays do not apply for out-of-network doctors' visits	Yes	Yes (not 100%)
M	\$40	50%	Yes	Yes

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

c. Prescription Drug Coverage

Code	Covered Under Medical Plan	Retail Card Drug Plan Only	Mail Order Drug Plan Only	Integrated Retail/ Mail Program	Retail Co-Pay		Mail Order Co-Pay	
					Generic	Brand Name	Generic	Brand Name
A	Yes	--	--	--	\$10	\$25	\$20	\$50
B	No	No	No	No	\$10	\$25	n/a	n/a
C	No	No	No	Yes	\$32	\$100 max after 30%	\$32	\$100 max after 30%
D	Yes	--	--	Yes	\$15	\$50	\$15	\$50
E	Yes	--	--	--	--	--	--	--
F	No	No	No	Yes	--	--	--	--
G	No	No	No	Yes	\$6	\$20 or 20%	\$14	\$40 or 20%
H	Yes	--	--	Yes	\$10 min / \$25 max	\$25 min / \$75 max (formulary)	\$20 min / \$50 max	\$50 min / \$150 max (formulary)
I	Yes	--	--	--	\$15	\$40 / \$60	\$30	\$80
J	Yes	--	--	--	\$8	\$30	\$24	\$90
K	Yes	Yes	No	No	\$35	\$50	--	--
L	No	No	No	Yes	\$10/\$20 or \$20/\$40	\$30/\$60 or \$60/\$120	\$20/\$40	\$60/\$150
M	Yes	No	No	Yes	\$10	\$40/\$75	\$20	\$80/\$150

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

d. Prescription Drug Coverage - Additional Comments

Code	Additional Comments
A	Mail Order 90-day supply / 2 months copay.
F	Deductible applied to all prescriptions.
L	Members on HDHP must first meet deductibles before copays apply.
M	Preventive medications with generic equivalent available for Diabetes, Asthma, Blood Pressure, Heart, and Cholesterol are \$0 copay for 90-day supply through retail/mail order.

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

e. Tobacco Surcharge

Code	Provide	Salaried Employee (monthly)	Spouse (monthly)
A	Yes	\$7.50	\$15.00
B	Yes	\$36	\$36
C	No	--	--
D	No	--	--
E	Yes	20% more on medical	20% more on medical
F	Yes	25%	--
G	No	--	--
H	No	Tobacco free employees and spouses earn a higher wellness incentive vs. a fee.	--
I	No	--	--
J	No	--	--
K	No	--	--
L	Yes	\$43.34	\$43.34
M	Yes	\$50	\$50

2019 Poultry Industry Compensation and Benefits Survey

R. Medical Insurance – continued**2. Hourly Personnel****a. Monthly Contributions for Medical Coverage Plan**

Code	Type	Provided	Employee Cost Per Month		
			Employee Only	Employee + 1	Family
A	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$65.00	\$108.00	\$217.00
B	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$122.00	\$216.00	\$312.00
C	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$125.97	\$356.05	\$468.56
D	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$112.67	\$253.50	\$377.00
E	Indemnity Plan	No	--	--	--
	High Deductible Plan	Yes	\$102.92	\$186.33	\$351.00
	PPO Plan	No	--	--	--
F	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$20.61	\$42.25	\$58.73
G	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$169.00	\$273.00	\$325.00

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

a. Monthly Contributions for Medical Coverage Plan – continued

Code	Type	Provided	Employee Cost Per Month		
			Employee Only	Employee + 1	Family
H	Indemnity Plan	Yes	--	--	--
	High Deductible Plan (HRA)	Yes	\$80.50	Spouse: \$151.50 Children: \$127.50	\$176.50
	PPO Plan	Yes	\$118.00	Spouse: \$189.00 Children: \$165.00	\$214.00
I	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$98.58	\$191.75	\$341.17
J	Indemnity Plan	No	--	--	--
	High Deductible Plan	No	--	--	--
	PPO Plan	Yes	\$82.42/\$110.20/ \$172.90	\$161.85/\$214.15/ \$345.97	\$271.66/\$350.87/ \$518.96
K	Indemnity Plan	No	--	--	--
	High Deductible Plan	Yes	--	--	--
	PPO Plan	Yes	\$132.00	\$455.65	\$702.45
L	Indemnity Plan	Yes	--	--	--
	High Deductible Plan	Yes	\$59.24	\$193.01	\$222.17
	PPO Plan	Yes	\$59.24	\$193.01	\$222.17
M	Indemnity Plan	No	--	--	--
	High Deductible Plan	Yes	\$87.72	\$215.56	\$416.91
	PPO Plan	Yes	\$103.90	\$265.90	\$460.95

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

b. Medical Plan Provisions

Medical Deductibles

Code	Plan with the Highest Enrollment	In-network		Out-of-network	
		Individual	Family	Individual	Family
A	Blue Plan	\$2,000	\$4,000	\$4,000	\$8,000
B	Standard Plan	\$1,150	\$2,300	\$2,300	\$4,600
C	Essential 20	\$1,200	\$2,400	\$2,400	\$4,800
D	Employee Only	\$1,000	\$3,000	\$3,000	\$9,000
E	CDHP	\$1,600	\$3,200	\$4,000	\$8,000
F	Standard PPO	\$400	\$800	--	--
G	Only Plan Offered	\$750	\$1,500	\$850	\$1,700
H	HRA Plan	\$1,200	\$2,400	\$2,400	\$4,800
I	High Plan	\$175	\$350	\$350	\$750
J	70/50 PPO	\$550	\$1,650	\$1,100	\$3,300
K	Base Plan	\$1,250	\$2,500	--	--
L	PPO Plan	\$1,100	\$2,200	\$1,100	\$2,200
M	PPO Preventative	\$500	\$1,000	\$1,500	\$3,000

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

b. Medical Plan Provisions

Maximums

Code	Maximum Deductible In-network		Maximum Deductible Out-of-network	
	Individual	Family	Individual	Family
A	\$4,000	\$10,000	No limit	No limit
B	\$4,500	\$9,000	\$9,000	\$18,000
C	\$6,000	\$12,000	\$12,000	\$24,000
D	\$3,000	\$6,000	\$9,000	\$18,000
E	\$5,000	\$10,000	\$12,500	\$25,000
F	\$3,000	\$6,000	--	--
G	\$5,000	\$10,000	\$6,000	\$12,000
H	\$3,500	\$6,850 ind / \$7,000 fam	\$7,000	\$14,000
I	\$2,500	\$5,000	\$5,000	\$10,000
J	\$3,050	\$9,150	\$6,150	\$18,400
K	\$5,000	\$10,000	--	--
L	\$1,100	\$2,200	\$1,100	\$2,200
M	\$6,600	\$13,200	\$16,500	\$33,000

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

b. Medical Plan Provisions

Doctors Visits

Code	Co-pay Required Per Doctors Visit		Is Preventive Care Provided?	
	In-network	Out-of-network	In-network	Out-of-network
A	\$15	0	Yes	No
B	\$40	\$50	No	No
C	\$30 / \$50	40% after deductible	Yes	Yes
D	\$30	60% after deductible	Yes	No
E	n/a	n/a	Yes	Yes
F	\$30	50%	Yes	No
G	--	--	Yes	No
H	20% coinsurance	40% coinsurance	Yes	Yes
I	\$20	40% after deductible	Yes	No
J	\$25 / \$50	50%	Yes	Yes
K	\$30	--	Yes	Yes
L	\$35 PCP	Co-pays do not apply for out-of-network doctors' visits	Yes	Yes
M	\$40	50% after deductible	Yes	Yes

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

c. Prescription Drug Coverage

Code	Covered Under Medical Plan	Retail Card Drug Plan Only	Mail Order Drug Plan Only	Integrated Retail/ Mail Program	Retail Co-Pay		Mail Order Co-Pay	
					Generic	Brand Name	Generic	Brand Name
A	No	--	--	Yes	\$10	\$25	\$20	\$50
B	No	No	No	No	\$10	\$25	--	--
C	No	No	No	Yes	\$32	\$100 max after 30%	\$32	\$100 max after 30%
D	Yes	--	--	Yes	--	--	--	--
E	Yes	--	--	--	--	--	--	--
F	Yes	--	--	Yes	10%	30%	10%	20%
G	No	No	No	Yes	\$6	\$20 or 20%	\$14	\$40 or 20%
H	Yes	--	--	Yes	\$10 min / \$25 max	\$25 min / \$75 max	\$20 min / \$50 max	\$50 min / \$150 max
I	Yes	--	--	--	\$15	\$40 / \$60	\$30	\$80
J	Yes	--	--	--	\$8	75%	\$24	75%
K	Yes	Yes	No	No	\$35	\$50	--	--
L	No	No	No	Yes	\$10/\$20 or \$20/\$40	\$30/\$60 or \$60/\$120	\$20/\$40	\$60/\$150
M	Yes	No	No	Yes	\$10	\$40/\$75	\$20	\$80/\$150

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

d. Prescription Drug Coverage - Additional Comments

Code	Additional Comments
A	Mail order 90-day supply/2 months copay.
L	Members on HDHP must first meet deductible before copays apply.
M	Preventive medications with generic equivalent available for Diabetes, Asthma, Blood Pressure, Heart, and Cholesterol are \$0 copay for 90-day supply through retail/mail order.

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

e. Tobacco Surcharge

Code	Provide	Salaried Employee (monthly)	Spouse (monthly)
A	Yes	\$5.00	\$10.00
B	Yes	\$36.00	\$36.00
C	No	--	--
D	No	--	--
E	Yes	20%	20%
F	Yes	25%	--
G	No	--	--
H	No	Tobacco free employees and spouses earn higher amounts of wellness incentives.	--
I	No	--	--
J	No	--	--
K	No	--	--
L	Yes	\$43.34	\$43.34
M	Yes	\$50.00	\$50.00

2019 Poultry Industry Compensation and Benefits Survey

S. Dental Plans**1. Salaried Personnel****a. Monthly Contributions for Dental Plan Coverage**

Code	Provide/ Highest Enrolled Plan	Employee Cost Per Month			Employee Contribution Toward Dental Coverage
		Employee Only	Employee + 1	Family	
A	Yes High Plan	\$19.98	\$52.39 (children) \$43.46 (spouse)	\$78.26	100%
B	Yes Only one plan	\$21.00	\$38.00	\$58.00	80%
C	Yes Buy-Up	\$9.75	\$20.63	\$34.36	30%
D	Yes Employee Only	\$13.30	\$22.19	\$31.03	60%
E	Yes Premium Plan	\$18.72	\$33.45	\$62.92	100%
F	Yes Only one plan	\$4.62	\$10.15	\$15.23	100%
G	Yes Included with health plan	\$9.75	\$15.17	\$20.58	35%
H	Yes Only one plan	\$14.00	\$13.00 (w/spouse) \$28.00 (children)	\$46.00	28%
I	Yes Only one plan	\$15.99	\$31.85	\$69.77	100%
J	Yes High Dental Plan	\$17.55 / \$10.57	\$36.01 / \$22.58	\$55.08 / \$40.95	100%
K	Yes Base Plan	\$22.85	\$45.70	\$87.51	100%
L	Yes Core Plan	\$11.14	\$22.06	\$45.98	55% (Buy-up Plan only)
M	Yes CIGNA	\$18.13	\$40.22	\$68.06	45%

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

b. Dental Maximums

Code	In-network			Out-of-network		
	Maximum Annual	Maximum Lifetime	Orthodontia	Maximum Annual	Maximum Lifetime	Orthodontia
A	\$1,500	--	\$1,500 lifetime	\$1,500	0	0
B	\$750	\$750	--	\$750	\$750	--
C	\$1,500	--	\$1,000 lifetime	\$1,500	--	\$1,000 lifetime
D	\$1,200	--	\$1,300 lifetime	\$1,200	--	\$1,300 lifetime
E	\$1,200 basic / \$1,500 premium	n/a	Basic – N/A \$1,500 lifetime premium	n/a	n/a	n/a
F	\$2,000	n/a	\$1,500 lifetime	\$2,000	--	\$1,500 lifetime
G	\$1,000	n/a	\$2,000 lifetime	\$1,000	n/a	\$2,000 lifetime
H	\$1,750	n/a	50% to lifetime max of \$2,000/person	--	--	--
I	\$1,500	n/a	\$1,500 annual \$1,500 lifetime	\$1,500	n/a	\$1,500 annual \$1,500 lifetime
J	\$1,500	n/a	\$1,500 lifetime	\$1,500	n/a	\$1,500 lifetime
K	\$1,000	--	\$1,000 lifetime	\$1,000	--	\$1,000 lifetime
L	\$1,500	n/a	\$1,500 lifetime	\$1,500	n/a	\$1,500 lifetime
M	\$2,000	--	\$1,500 lifetime	\$1,500	--	\$1,500 lifetime

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

c. Dental - Additional Comments

Code	Additional Comments
L	Core dental coverage provided at no cost to members (preventative only).

2019 Poultry Industry Compensation and Benefits Survey

S. Dental Plans - continued**2. Hourly Personnel****a. Monthly Contributions for Dental Plan Coverage**

Code	Provide / Highest Enrolled Plan	Employee Cost Per Month			Employee Contribution Toward Dental Coverage
		Employee	Employee + 1	Family	
A	Yes Low Plan	\$12.62	\$30.64 (children) \$25.70 (spouse)	\$45.02	100%
B	Yes Only one plan	\$21.00	\$38.00	\$58.00	80%
C	Yes Buy Up	\$9.75	\$20.63	\$34.36	30%
D	Yes Employee Only Plan	\$13.30	\$22.19	\$31.03	60%
E	Yes Premium Plan	\$18.72	\$33.45	\$62.92	100%
F	Yes Premium	\$2.79	\$5.72	\$8.24	100%
G	Yes Advanced	\$10.44 / \$17.25	\$21.41 / \$35.36	\$32.37 / \$53.43	100%
H	Yes Only one plan	\$14.00	\$31.00 (w/spouse) \$28.00 (children)	\$46.00	24%
I	Yes Only one plan	\$15.99	\$31.85	\$69.77	100%
J	Yes High Dental Plan	\$17.55 / \$10.57	\$36.01 / \$22.58	\$55.08 / \$40.95	100%
K	Yes Base Plan	\$22.85	\$45.70	\$87.51	100%
L	Yes Core Plan	\$11.14	\$22.06	\$45.98	0% Core Plan
M	Yes CIGNA	\$21.51	\$45.28	\$76.45	47%

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

b. Dental Maximums

Code	In-network			Out-of-network		
	Maximum Annual	Lifetime Annual	Orthodontia	Maximum Annual	Lifetime Annual	Orthodontia
A	\$1,000	--	--	\$1,000	--	--
B	\$750	n/a	n/a	\$750	n/a	n/a
C	\$1,500	--	\$1,000 lifetime	\$1,500	--	\$1,000 lifetime
D	\$1,200	--	\$1,300 lifetime	\$1,200	--	\$1,300 lifetime
E	\$1,200 basic / \$1,500 premium	n/a	\$1,500 lifetime premium	n/a	n/a	n/a
F	\$1,250	n/a	\$1,500 lifetime	n/a	n/a	n/a
G	\$750	--	--	\$750	--	--
H	\$1,750	--	50% up to lifetime max of \$2,000/person	--	--	--
I	\$1,500	n/a	\$1,500 annual \$1,500 lifetime	\$1,500	n/a	\$1,500 annual \$1,500 lifetime
J	\$1,500	--	\$1,500 lifetime	\$1,500	--	\$1,500 lifetime
K	\$1,000	--	\$1,000 lifetime	\$1,000	--	\$1,000 lifetime
L	\$1,500	n/a	\$1,500 lifetime	\$1,500	n/a	\$1,500 lifetime
M	\$2,000	--	\$1,500 lifetime	\$1,500	--	\$1,500 lifetime

2019 Poultry Industry Compensation and Benefits Survey

2. Hourly Personnel

c. Dental - Additional Comments

Code	Additional Comments
C	Annual INN/OON combined.
L	Core dental plan provided at no cost to the member (preventative only). Orthodontia is not available for core plan members.

2019 Poultry Industry Compensation and Benefits Survey

T. Vision Plans**1. Salaried Personnel****a. Monthly Contributions for Vision Plan Coverage**

Code	Provide	Employee Cost Per Month			Employee Contribution Toward Vision Coverage
		Employee	Employee + 1	Family	
A	Yes	\$5.24	\$9.00 (child) \$8.84 (spouse)	\$14.26	100%
B	Yes	\$21.00	\$38.00	\$58.00	80%
C	Yes	\$5.72	\$10.01	\$14.84	100%
D	Yes	\$4.33	\$8.67	\$10.83	94%
E	Yes	\$4.60	\$8.50	\$13.30	100%
F	Yes	\$1.93	\$3.96	\$6.09	100%
G	No	--	--	--	No
H	Yes	\$7.67	\$15.00 (w/spouse) \$16.32 (children)	\$23.55	100%
I	Yes	\$5.72	\$11.44	\$18.42	100%
J	Yes	\$4.38	\$7.67	\$10.57	100%
K	Yes	\$5.87	\$11.18	\$17.29	100%
L	Yes	\$3.56	\$7.11	\$10.27	44% (Buy-Up Plan Only)
M	Yes	\$4.01	\$9.12	\$13.86	50%

2019 Poultry Industry Compensation and Benefits Survey

1. Salaried Personnel

b. Vision Maximums

Code	In-network		Out-of-network		Comments
	Maximum Annual	Maximum Lifetime	Maximum Annual	Maximum Lifetime	
A	--	--	--	--	--
B	\$750	n/a	\$750	n/a	--
C	n/a	n/a	n/a	n/a	--
D	n/a	n/a	n/a	n/a	--
E	--	--	--	--	--
F	--	--	--	--	No maximum
G	--	--	--	--	--
H	Varies by benefit	n/a	--	--	\$20 copay eye exams; Frames every two years with an \$150 allowance; Lenses 100% every year; Contacts lenses - \$150 max per year.
I	\$200	--	\$200	--	--
J	--	--	--	--	--
K	--	--	--	--	--
L	--	--	--	--	Core vision coverage provided at no cost. Buy-Up Plan coverage requires contribution.
M	\$120 allowance	--	\$100 allowance	--	Lenses/frames 24 months in or out-of-network.

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T. Vision Plans - continued

2. Hourly Personnel

a. Monthly Contributions for Vision Plan Coverage

Code	Provide	Employee Cost Per Month			Employee Contribution Toward Vision Coverage
		Employee	Employee + 1	Family	
A	Yes	\$5.24	\$9.01 (child) \$8.84 (spouse)	\$14.26	100%
B	Yes	\$21.00	\$38.00	\$58.00	80%
C	Yes	\$5.72	\$10.01	\$14.82	100%
D	Yes	\$4.33	\$8.67	\$10.83	95%
E	Yes	\$4.60	\$8.50	\$13.30	100%
F	Yes	\$0.97	\$1.98	\$3.05	100%
G	No	--	--	--	No
H	Yes	\$7.67	\$15.00 (w/spouse) \$16.32 (children)	\$16.32	100%
I	Yes	\$5.72	\$11.44	\$18.42	100%
J	Yes	\$4.38	\$7.67	\$10.57	100%
K	Yes	\$5.87	\$11.18	\$17.29	100%
L	Yes	\$3.56	\$7.11	\$10.27	44% (Buy-Up Plan Only)
M	Yes	\$4.09	\$8.65	\$13.56	50%

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2. Hourly Personnel

b. Vision Maximums

Code	In-network		Out-of-network		Comments
	Maximum Annual	Maximum Lifetime	Maximum Annual	Maximum Lifetime	
A	--	--	--	--	--
B	\$750	n/a	\$750	n/a	--
C	--	--	--	--	--
D	n/a	n/a	n/a	n/a	--
E	--	--	--	--	--
F	n/a	n/a	--	--	--
G	--	--	--	--	--
H	Varies by benefit	n/a	--	--	\$20 copay eye exams; Frames every two years with an \$150 allowance; Lenses 100% every year; Contacts lenses - \$150 max per year.
I	\$200	--	\$200	--	--
J	--	--	--	--	--
K	--	--	--	--	--
L	--	--	--	--	Core vision coverage provided at no cost. Buy-Up Plan coverage requires contribution.
M	\$120 allowance	--	\$100 allowance	--	--

2019 Poultry Industry Compensation and Benefits Survey

IV. MERIT BUDGET / SALARY RANGE CHANGES

In keeping with the Safe Harbor Guidelines, data is presented in the aggregate and future increases are not a part of the survey.

A. Salary Merit Increases

	FY 2018 Actual	FY 2018 Planned
Highest	5.0%	3.3%
75th Percentile	3.1%	3.0%
Median	3.0%	3.0%
Average	2.9%	2.9%
25th Percentile	2.6%	2.5%
Lowest	0	2.5%
No. of Companies	12	11

B. Salary Range Movement

	Current Budget Year
Highest	3.5%
75th Percentile	3.0%
Median	2.5%
Average	2.35%
25th Percentile	2.0%
Lowest	0
No. of Companies	10

2019 Poultry Industry Compensation and Benefits Survey

C. Salary Range Adjustment Date

No. of Companies	Date
1	March
2	April
1	May
2	June
1	July
1	August
1	September
4	Not answered / Unknown / Not Applicable

V. GENERAL QUESTIONNAIRE FINDINGS

In this section data is presented in seven areas, as follows:

A. Incentive Compensation Plans:

Incentive compensation plan prevalence and inclusions are identified.

B. Poultry Processing Plant Average Rates:

In keeping with the Safe Harbor Guidelines, this data is reported in the aggregate and is broken out geographically. For each breakout, there had to be responses from at least four different companies.

C. Human Resources Functions Outsourced/Human Resource Staff Ratio:

This is a practice in many organizations today. The data is displayed by company code. Three (3) companies do not outsource any Human Resources functions.

Also included is the Human Resource Staff Ratio which was determined by dividing the total number of employees (organization wide) by your total human resource headcount (exempt positions only; safety excluded).

D. Starting Salaries Paid For a BA/BS Degree:

Data is shown in the aggregate, as outlined in the Safe Harbor Guidelines. It is quite likely that geographic location is an influencing factor here, to some degree, as well as the desired market position of an organization.

E. Titling:

Organizations frequently struggle with appropriate titles to use. Furthermore, titles may be misleading. In an attempt to avoid a problem of this type, you will find listed in this area:

- ▶ JBCD, the Job Code used in the survey packet;
- ▶ The titles reported against this Job Code;
- ▶ An indication of the position to which the reported/matched company position typically reports.

2019 Poultry Industry Compensation and Benefits Survey

F. Plant Turnover:

Data is shown pertaining to plant turnover (overall, union and non-union). Data is shown in the aggregate.

2019 Poultry Industry Compensation and Benefits Survey

A. Incentive Compensation Plans**1. Company Wide Incentive / Bonus Plan**

Provided	
Yes	11
No	2

2. Plan includes (for those having a plan):

Eleven (11) companies have a plan.

	Yes	No
Executive	11	0
Director Level	11	0
Manager Level	11	0
Other Exempt	10	1
Nonexempt (Salaried)	1	10
Nonexempt (Hourly)	2	9

2019 Poultry Industry Compensation and Benefits Survey

3. Incentive / bonus plan metrics:

Incentive / Bonus Metrics	Executive	Director	Manager	Other Exempt Employees	Nonexempt (Salaried)	Nonexempt (Hourly)
Revenue (Company Wide)	7	6	6	6	--	--
Profitability (Company Wide)	11	10	9	9	1	2
Revenue (Complex and/or Individual Plant)	1	1	1	1	--	--
Profitability (Complex and/or Individual Plant)	1	1	2	2	--	--
Other: Individual Culture Score; Individual Goal Achievement	1	1	1	1	--	--
Production bonus for production goals	--	1	1	1	1	1
Bi-Annual plan based on individual/area objectives	--	--	--	1	--	--
Gainsharing Program (Value Add/Labor Costs)	1	1	1	1	1	1
Agri-stats	1	1	1	1	--	--
Agri-stats Standing	1	1	1	1	--	--
Performance and Agri-stats	1	1	1	1	--	--
Safety; Target product growth	1	1	1	1	--	--
Individual Performance (performance against goals, i.e. these may include Plant KPI's, project deliverables, etc.	1	1	1	1	1	1
Company Profitability as measured by EBITDA.						

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B. Poultry Processing Plant Average Rates

Tables follow.

**2019 Poultry Industry Compensation and Benefits Survey
- Poultry Processing Plant Average Rates -**

Range of Survey Responses	Total # of Employees	Entry Level Start Rate	Entry Level Base Rate	# of Employees at Entry Level Base Rate	Weighted Average Base Rate	Highest Level Base Rate	Amount of 2nd Shift Premium	Amount of 3rd Shift Premium	Annual Turnover Percentage	Union Turnover Percentage	Non-Union Turnover Percentage
All Processing Workers											
90th	1328	\$12.75	\$13.50	1051	14.25	\$17.00	\$1.00	\$1.00	115.0%	120.5%	87.0%
75th	1068	\$12.00	\$12.75	663	13.44	\$15.90	\$0.50	\$0.50	83.0%	83.0%	65.2%
50th	718	\$11.50	\$12.25	312	12.73	\$14.87	\$0.35	\$0.38	58.2%	55.0%	53.7%
Average	780	\$11.49	\$12.35	445	12.97	\$14.86	\$0.43	\$0.49	65.3%	66.5%	53.2%
25th	436	\$11.00	\$11.80	159	12.28	\$13.55	\$0.25	\$0.30	44.0%	45.0%	33.8%
10th	266	\$10.20	\$11.45	67	12.03	\$13.00	\$0.15	\$0.20	28.0%	28.0%	23.0%
Number of Plants	146	146	143	143	139	134	139	134	143	41	68